

What about this drug resistant yeast *Candida auris*??

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Candida auris (*C. auris*) is a yeast that is causing serious infections and death across the country in hospitals, post-acute care facilities and now nursing homes. CDC has indicated that a vast majority of patients/residents colonized or infected with *C. auris* currently or previously resided in a skilled nursing facility caring for ventilated patients or long-term acute care hospitals. The majority of cases with available risk factor data continue to show previously described risk factors including tracheostomies, feeding tubes, wounds, and mechanical ventilation. Most *C. auris* cases in the United States have been detected in the New York City area, New Jersey, and the Chicago area. This close proximity in Illinois makes us take pause to make sure all facilities in Indiana begin to share this knowledge regarding prevention and control. The Healthcare Associated infection and Antimicrobial Resistant (HAI-AR) team is at work planning education and assessment plans for this novel threat beginning in District 1 .

If a case is reported to you by your lab or by hand off from an outlying facility indicating positive culture or colonization please notify ISDH Antimicrobial Resistant (AR) Epidemiologist at 317.233.1306 office phone. Know that our HAI-AR team will be responding to this novel organism threat in our state by a united effort to do both proactive a reactive infection control risk assessments in the northwest targeted area. I may be contacting the Infection Preventionist (IP) or administrator in your facility to set up in the near future.

Key Infection Prevention Measures to Know:

The mainstay of infection control measures for this organism still is the backbone of infection prevention. Hand hygiene, standard precautions, early contact precautions for known cases, and proper environmental cleaning. In addition, HAI-AR will conduct screening in facilities where newly identified cases are seen to determine if transmission has occurred in the facility.

The CDC website for Infection Prevention Guidance is: <https://www.cdc.gov/fungal/candida-auris/c-auris-infection-control.html>

- Placing the patient with *C. auris* in a single-patient room and using [Standard and Contact Precautions](#).
- Emphasizing adherence to standard practices for [hand hygiene](#).
- [Cleaning and disinfecting](#) patient care environment and reusable equipment (daily and terminal cleaning) with recommended products. Note that Quaternary ammonium compounds that are routinely used for disinfection may not be effective for *C. auris*. Use the CDC List K which indicates products tested that are sporicidal and work best for this organism.
- Inter-facility communication about patient's *C. auris* status at [transfer to another healthcare facility](#). Hand off to the next facility matters! Call the IP at the facility to assure proper precautions are taken.

As part of Contact Precautions, healthcare personnel should:

- Always wear gown and gloves to reduce hand contamination.
- Avoid touching surfaces outside the immediate resident care environment while wearing gloves.

- Perform hand hygiene before donning gloves and following glove removal

For guidance on Implementation of Personal Protective Equipment in Nursing Homes to prevent the spread of novel or targeted MDROs (July 26, 2019) Updated guidance see this link:

<https://www.cdc.gov/hai/containment/PPE-Nursing-Homes.html>

This guidance was recently posted by CDC to address the use of PPE for these novel organisms and add Enhanced Barrier Precautions (EBP) which recommends use of gown and gloves for certain residents during specific high-contact activities. This is for the management of residents ***colonized with novel and emerging AR pathogens*** (e.g., Carbapenemase-producing organisms or C. auris). CDC recognized that prolonged use of Contact Precautions with room restriction for residents ***colonized*** with these organisms would not be feasible, but given the increased risk for ongoing transmission of these pathogens, wanted to offer nursing homes an alternative to Contact Precautions that provided more specific information on when to implement barriers (gown/gloves) during care of these residents.

Please feel free to contact me should you have further questions or concerns.

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